

	FORM	CHECK APPROPRIATE BOXES	ONTRIBUTIONS AND EXPENDITURES —PLEASE TYPE OR PRINT IN BLACK INK	REGELVED
		Quarterly Report: (Check one:)	1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup> 4 <sup>th</sup>	JUL 08 2021
	D-2		ance on Line E must be \$0)	State Board of Elections
4.11.5	Amendment of the Rep		eport Indicated Above	Springfield Office
Full name and co	omplete mailing ac	dress of Political Committee:	CHECK FOR ADDRESS CHANGE	COMMITTEE ID#
Democratic Women of Knox County				Committee ID: 16139
PO Box 433				11
Galesburg, IL 61401-0433				
		_	·	111201
E-mail address:			CHECK FOR E-MAIL ADDRESS CHANGE	1613911
REPORTING PERIOD CASH AVAILABLE AT BEGINNING OF REPORTING PERIOD:			ALL POLITICAL COMMITTE	ES RETURN TO:
4/1/21 6/30/21 \$ 3646.72			STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD OR	STATE BOARD OF ELECTIONS JAMES R THOMPSON CENTER
FROM THRU Repeat this amount in SECTION D, Line (A)			SPRINGFIELD, IL 62704-4503	100 W RANDOLPH, STE 14-100 CHICAGO, IL 60601-3232
SECTION A — RECEIPTS			SECTION B — EXPENDITURES	
1. Individual Contributions			6. Transfers Out	A LINDITORLS
	i (from Schedule A	): \$(1a)		\$ (6a)
b. Not-Itemized: \$(1b)			b. Not-Itemized:	\$ 100.00 (6b)
2. Transfers In			7. Loans Made	•
a. Itemized (from Schedule A): \$(2a)			<ul> <li>a. Itemized (from Schedule B):</li> </ul>	\$(7a)
b. Not-Itemized: \$(2b)			b. Not-Itemized:	\$(7b)
3. Loans Received			8. Expenditures	
a. Itemized (from Schedule A): \$(3a)			a. Itemized (from Schedule B):	\$(8a)
b. Not-Itemized \$(3b)			b. Not-Itemized	\$(8b)
4. Other Receipts a. Itemized (from Schedule A): \$(4a)			<ul><li>9. Independent Expenditures</li><li>a. Itemized (from Schedule B-9</li></ul>	): \$(9a)
b. Not-Itemized \$ (4b)			b. Not-Itemized	\$ (9b)
TOTAL RECEIPTS (1a thru 4b) \$(TR)			TOTAL EXPENDITURES (6a thru	
	**************	,	TOTAL LAFENDITORES (Sa tillu	50/5 <u>·····</u>
		• * * * * * * * * * * * * * * * * * * *	SECTION C — DEBTS A	
5. In-Kind Con	tributions (from Schedule I):	\$(5a)	(Include previously repor <b>10.</b> a. Itemized (from Schedule C):	ted unpaid debts) \$(10a)
b. Not-Itemi	•	\$ , i \$ (5b)	b. Not-Itemized	\$ (10b)
		\$ <u>~ ! \( \)</u> (TI)	_	\$(100)
TOTAL IN-KIN	**************************************		TOTAL DEBTS & OBLIGATIONS	<b>&gt;</b>
			SECTION D — CA	SH BALANCE
Name and address of person submitting this report <u>if other</u> the committee's Chair or Treasurer:			Cash available at beginning or reporting period	of \$3646.72 (A)
			Total Receipts from Section A (TR	107
			Total cash (A) plus (E	3): \$(C)
			Total Expenditures from Section B (TE	(D) <u>Go. OG1</u> (E)

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.

SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE



Funds available at close of reporting period (C minus D): \$ 3 54 6 90 (E)

Investments total (if applicable): \$\_\_\_\_

